Grimes Parks & Recreation De

Telephone: (515) 986-2143

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www.grimesiowa.gov



NEW! Coupon Classes at the GCC

Program Description:

This new class will be taught by Katie Kitterman, who will be featured in the October issue of *All You* as a Super Saver. She will introduce new ways on how to save money on groceries, household items, clothing, and more! Students will become familiar with several coupon resources, such as Facebook, Newspapers, Blogs, Local Ads, and rebates. The class also teaches store coupon policies, and how to understand and properly use coupons.

Who: Adults ages 16 and Up

Where: Grimes Community Complex at 410 SE Main Street in Grimes

Dates: Saturday, January 21, 2012

Times: 10:00am - Noon

Instructor: Katie Kitterman, Super Saver



Questions: Contact Brett Barber, Grimes Parks & Recreation Director at <u>bbarber@ci.grimes.ia.us</u> or by phone at 986-2143.

To Register: Online at **www.grimesiowa.gov** or pay with cash/check to **City of Grimes** and bring in the registration to the GCC Parks & Rec Office or mail to 410 SE Main St. in Grimes.

Cost:	\$12 per class per person			
	Cut Here2011 Coupon Cl	asses at the C	GCC	
PARTICIPA	NT'S NAME:			
PARENT/GI	UARDIAN'SNAME (if minor):			
STREET AD	DRESS:	CITY:	ZIP CODE: _	
EMAIL:			_PHONE:	
Please subsc	ribe me to the Grimes P & R Email List (G	Circle): Yes	No	Already

Cost is \$12 per class per person

Release and Indemnification Agreement:

I hereby request that you accept my child's application for registration in this Grimes Park and Recreation Department program. With consideration of your acceptance of my child, I hereby release the City of Grimes, its employees, and the coaches and volunteers associated with this program from all claims which may arise in the event my child is injured in an accident that occurs while he or she is participating in this program. I further agree to indemnify the City of Grimes, its employees, and the coaches and volunteers associated with this program for any claim, which may hereafter be presented on behalf of my child as a result of any such injuries. I hereby acknowledge that it is my responsibility, not the responsibility of the City of Grimes, to provide medical insurance coverage in the event I desire to have medical insurance coverage for my child while he or she participates in this particular activity. I will also allow pictures of my child during this program to be used only for the marketing purposes of future Grimes Parks and Recreation programs.

Signature of Parent or Guardian Date

Grimes Parks and Rec Office ~ 410 SE Main St. in Grimes